BID SOLICITATION



BID NUMBER: B02441

TITLE: LAUNDRY BAGS

BID OPENING DATE AND TIME:

06/03/2003 11:00 AM

BUYER: JOHN COWELL
PHONE #: (401) 222 - 2142 ext. 114
BLANKET PERIOD: 8/1/03 - 7/31/04

S MENTAL HEALTH, RETARDATION & HOSPITALS MHRH-ESH ELEANOR SLATER HOSPITAL

I ZAMBARANO UNIT
P 2090 WALLUM LAKE ROAD

PASCOAG RI 02859-1813

T 0

MENTAL HEALTH, RETARDATION & HOSPITALS MHRH-ESH ELEANOR SLATER HOSPITAL ZAMBARANO UNIT 2090 WALLUM LAKE ROAD PASCOAG RI 02859-1813

Requisition Number(s): R76D032764

TERMS OF PAYMENT:

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Item	Class-Item	Quantity	Unit	Unit Price	Total
	BLANKET REQUIREMENTS: 8/1/03 - 7/31/04				
	BIDDING				
	(a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State.				
	(b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered.				
	(c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost.				
	(d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request.				
	ORDERING				
	(a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period.				
	(b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.				

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer.

USE CERTIFICATION COVER FORM.

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BID SOLICITATION



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Printed: 5/13/2003

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Т 0 **PROVIDENCE RI 02908**

BID NUMBER: B02441

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BUYER: JOHN COWELL PHONE #: (401) 222 - 2142 ext. 114 BLANKET PERIOD: 8/1/03 - 7/31/04

MENTAL HEALTH, RETARDATION & HOSPITALS Н MHRH-ESH ELEANOR SLATER HOSPITAL

ı **ZAMBARANO UNIT** 2090 WALLUM LAKE ROAD Ρ

PASCOAG RI 02859-1813

Т 0

Requisition Number(s): R76D032764

2090 WALLUM LAKE ROAD

PASCOAG RI 02859-1813

ZAMBARANO UNIT

TERMS OF PAYMENT:

MENTAL HEALTH, RETARDATION & HOSPITALS

MHRH-ESH ELEANOR SLATER HOSPITAL

Item	Class-Item	Quantity	Unit	Unit Price	Total
	IF SAMPLES ARE REQUESTED, THEY MUST BE PROVIDED WITHIN TEN (10) WORKING DAYS OF REQUEST DATE. FAILURE TO DO SO MAY RESULT IN DISQUALIFICATION OF BID.				
1.0	510-22 LAUNDRY BAGS 100% POLYESTER TREATED WITH A DURABLE WATER-REPELLENT COATING.	25.00	DOZ		
	BRAND: RT STYLE: 3040 POLY SIZE: 30" X 40" ELASTIC HEM NEEDED COLOR: FIVE OR MORE COLORS NEEDED; INCLUDING RED, GREEN, WHITE, BLUE, YELLOW, ETC.				
2.0	510-22 LAUNDRY BAGS 100% POLYESTER TREATED WITH A DURABLE WATER-REPELLENT COATING.	25.00	DOZ		
	BRAND: RT STYLE: 4040 SIZE: 40" X 40" ELASTIC HEM NEEDED COLORS: FIVE OR MORE, SAME AS ABOVE				
	COLORS, AND QUANTITIES OF EACH COLOR, TO BE DETERMINED BY AGENCY.				

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DELIVERY:	RIVIP VENDOR ID#:	

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MHRH-ESH ELEANOR SLATER HOSPITAL

MENTAL HEALTH, RETARDATION & HOSPITALS

Requisition Number(s): R76D032764

TERMS OF PAYMENT:

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Item	Class-Item	Quantity	Unit	Unit Price	Total
	DELIVERIES ACCEPTED BETWEEN 7:00 AM - 2:00 PM, MONDAY - FRIDAY, EXCLUDING HOLIDAYS.				
	CONTACT PERSON: CHRIS GREENLIEF/JMH (401) 568-2551				
	DELIVERY OF GOODS OR SERVICES AS REQUESTED BY AGENCY.			TOTAL:	
				TOTAL.	

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